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Substitute for form 1449A/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)		Application Number	
		Filing Date	10-17-01
		First Named Inventor	TIM WARLICK
		Art Unit	
		Examiner Name	
Sheet /	of /	Attorney Docket Number	

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. 1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (if known)			
		US- 2,970,448	2-7-61	CARL J. DI JULIO	PAGE 1 COL 1 LINES 50-60
		US- 3,039,273	6-19-62	GEORGE O. SWINDELL	PAGE 1 COL 1 LINES 54-72
		US- 3,192,723	7-6-65	KENNETH L. APPERSON	PAGE 1 COL 2 LINES 1-38
		US- 3,220,197	11-30-65	JAMES S. CHRISTIANSEN	COL 2 LINES 34-58
		US- 3,263,432	8-2-66	DENNIS FORD MASKELL	DRAWINGS
		US- 3,401,529	9-17-68	THOMAS B. F. FIELD	FIGURES 1,3
		US- 3,648,324	3-14-72	GIUSEPPE STRADELLA	GENERAL INTEREST
		US- 3,808,824	5-7-74	BILLY RAY JOHNSTON	GENERAL INTEREST
		US- 3,851,488	12-3-74		COL 1 LINES 43-51
		US- 4,789,270	12-6-88	STEVEN L. SELISKY	DRAWINGS
		US- 4,848,965	7-18-89	ROBERT L. PETERSON	GENERAL INTEREST
		US- 5,205,672	4-27-93	ROBERT T. STINTON	COL 2 LINES 55-68
					FIGURE 5
					GENERAL INTEREST
					GENERAL INTEREST

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. 1	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ - Number ⁴ - Kind Code ⁵ (if known)				

Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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DEC 18 2001

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐Customer Number
or Bar Code LabelOR ☒

Correspondence address below

Name TIM WARLICKAddress 2273 GRAHAM ROADCity BAYSIDEState CA.ZIP 95524Country USATelephone 707 8228823

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐

A petition has been filed for this unsigned inventor

Given Name TIMOTHY DAVID WARLICK
(first and middle [if any])Family Name TIM WARLICK
or SurnameInventor's
Signature Tim WarlickDate 10-17-01Residence: City BAYSIDEState CA.Country USACitizenship USAMailing Address 2273 GRAHAM ROADCity BAYSIDEState CA.ZIP 95524Country USANAME OF SECOND INVENTOR: ☐

A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])Family Name
or SurnameInventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

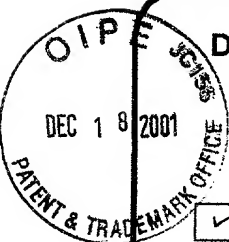
State

ZIP

Country

☐ Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)



Declaration
Submitted
with Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

First Named Inventor

TIM WARLICK

COMPLETE IF KNOWN

Application Number

/

Filing Date

10-17-01

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NON-SLIP DIVE BELT BALLAST AND MOLD SYSTEM

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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